

United States Bankruptcy Court Northern District of Georgia		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Pless, Larry Thomas		Name of Joint Debtor (Spouse) (Last, First, Middle): Pless, Mary Ivie
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): aka Larry T. Pless; dba Dillard General Store; dba Pless, Inc.		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): aka Mary Pless; aka Mary I. Pless; dba Dillard General Store; dba Pless, Inc.
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 3932		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 1905
Street Address of Debtor (No. and Street, City, and State) 1847 Old Cleveland Road Cornelia, GA		Street Address of Joint Debtor (No. and Street, City, and State) 1847 Old Cleveland Road Cornelia, GA
ZIPCODE 30531		ZIPCODE 30531
County of Residence or of the Principal Place of Business: Habersham		County of Residence or of the Principal Place of Business: Habersham
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):
ZIPCODE		ZIPCODE
Location of Principal Assets of Business Debtor (if different from street address above):		ZIPCODE
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other N.A.	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
Chapter 15 Debtors Country of debtor's center of main interests: _____ Each country in which a foreign proceeding by, regarding, or against debtor is pending: _____	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)	Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. §101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D) <input type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D) Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter).	
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.	Check all applicable boxes <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).	
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000	THIS SPACE IS FOR COURT USE ONLY	
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition (This page must be completed and filed in every case)		Name of Debtor(s): Larry Thomas Pless & Mary Ivie Pless
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)		
Location Where Filed: NONE	Case Number:	Date Filed:
Location Where Filed: N.A.	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)		
Name of Debtor: NONE	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts)
(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)		I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		X <u>/s/ W. Ross McConnell</u> <u>04/09/13</u> Signature of Attorney for Debtor(s) Date
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?		
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.		
<input checked="" type="checkbox"/> No.		
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)		
<input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.		
If this is a joint petition:		
<input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.		
Information Regarding the Debtor - Venue (Check any applicable box)		
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.		
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.		
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.		
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes)		
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)		
(Name of landlord that obtained judgment)		
(Address of landlord)		
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and		
<input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.		
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).		

Voluntary Petition*(This page must be completed and filed in every case)*

Name of Debtor(s):

Larry Thomas Pless & Mary Ivie Pless

Signatures**Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Larry Thomas Pless

Signature of Debtor

X /s/ Mary Ivie Pless

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

04/09/13

Date

Signature of Attorney*X /s/ W. Ross McConnell

Signature of Attorney for Debtor(s)

W ROSS MCCONNELL 485010

Printed Name of Attorney for Debtor(s)

W. Ross McConnell & Associates

Firm Name

1079 South Main Street

Address

Post Office Box 170 Cornelia, GA 30531(706)778-0341 wrmccassoc@windstream.net
Telephone Number e-mail04/09/13

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only **one** box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 of title 11 are attached.

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

(Date)

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, (2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X _____

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B1 D (Official Form 1, Exhibit D) (12/09)

UNITED STATES BANKRUPTCY COURT
Northern District of Georgia

In re Larry Thomas Pless & Mary Ivie Pless
Debtor(s)

Case No. _____
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Larry Thomas Pless
LARRY THOMAS PLESS

Date: 04/09/13

B1 D (Official Form 1, Exhibit D) (12/09)

UNITED STATES BANKRUPTCY COURT
Northern District of Georgia

In re Larry Thomas Pless & Mary Ivie Pless
Debtor(s)

Case No. _____
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Joint Debtor: /s/ Mary Ivie Pless
MARY IVIE PLESS

Date: 04/09/13

In Re Larry Thomas Pless & Mary Ivie PlessCase No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2013(db)	7280	Country Hideaway
2012(db)	15551	Country Hideaway/Spherion Staffing
2011(db)	0	Unemployed
2013(jdb)	8800	Ready Legal Support
2012(jdb)	35215	Ready Legal Support
2011(jdb)	23479	Ready Legal Support/Self-Employed

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
2013 (db) 0	
2012(db) 0	
2013(jdb) 0	
2012(jdb) 0	

None **3. Payments to creditors**

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Bank of America NA POB 650070 Dallas TX 75265-0070	04/13	\$4,005	107,046.00
Alphera Financial Services POB 3608 Dublin OH 43016-0306	03/13	\$1,120	11,613.00
United Community Banks Inc POB 398 Blairsville GA 30514	03/13	\$900	\$36,889
United Community Banks Inc POB 398 Blairsville GA 30514	01/13	\$950	\$156,685

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

*Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after date of adjustment.

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
FIA CARD SERVICES NA VS LARRY T PLESS 12-ST-89	COMPLAINT ON CONTRACT	STATE COURT HABERSHAM COUNTY STATE OF GEORGIA	Pending
FIA CARD SERVICES NA VS Larry T Pless 12-ST-91	Complaint On A Contract	State Court Habersham County State Of Georgia	Pending
Midland Funding LLC Vs Mary Pless 13-244-CS	Complaint On Credit Card Account	Magistrate Court Habersham County State Of Georgia	Pending

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
------------------------------------------------------------------	-----------------	-----------------------------------

5. Repossessions, foreclosures and returns

None a. List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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6. Assignments and Receiverships

None a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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7. Gifts

None List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
--------------------------------------------------	-----------------------------------	-----------------	----------------------------------

8. Losses

None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
-----------------------------------------	-----------------------------------------------------------------------------------------------------------------	-----------------

9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
W. Ross McConnell W. Ross McConnell & Associates 1079 South Main Street Post Office Box 170 Cornelia, GA 30531	03/28/13	\$20 Credit Counseling
W. Ross McConnell W. Ross McConnell & Associates 1079 South Main Street Post Office Box 170 Cornelia, GA 30531	03/28/13	\$281 Filing Fees

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
----------------------------------------------------	---------------------------------------------------------------------	----------------------------	---------------------------------------------

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
------------------------------	----------------------	------------------------

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
------------------------------	--------------------------------------	----------------------

15. Prior address of debtor

None If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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16. Spouses and Former Spouses

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
--------------------------	------------------------------------------	-------------------	----------------------

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
--------------------------	------------------------------------------	-------------------	----------------------

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None



NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
------------------------------------------	---------------	-----------------------

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Pless, Inc.	58-2636780		General Merchandise	08/01 to 10/11

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, record and financial statements

None a. List all bookkeepers and accountants who within the two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

Debtor's Possession

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the two years immediately preceding the commencement of this case by the debtor.

NAME AND ADDRESS

DATE

ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY
(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF
INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

Joint Debtor

100

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF
STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distribution by a corporation

None If the debtor is a partnership or a corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF
RECIPIENT, RELATIONSHIP
TO DEBTOR

DATE AND PURPOSE
OF WITHDRAWAL

AMOUNT OF MONEY OR
DESCRIPTION AND
VALUE OF PROPERTY

24. Tax Consolidation Group

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the six-year period immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * *

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	04/09/13	Signature of Debtor	/s/ Larry Thomas Pless LARRY THOMAS PLESS
Date	04/09/13	Signature of Joint Debtor	/s/ Mary Ivie Pless MARY IVIE PLESS

0 continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110(c).)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X
Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petitioner's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

B6 Cover (Form 6 Cover) (12/07)

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or in part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

In re Larry Thomas Pless & Mary Ivie Pless
 Debtor

Case No. _____
 (If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
House on 1.79 Acres 1847 Old Cleveland Road Cornelia GA 30531 Habersham	Fee Simple	J	150,000.00	107,046.00
1975 Double-Wide Mobile Home on 1.31 Acres 1937 Old Cleveland Rd Cornelia GA 30531 Habersham County	Fee Simple	J	10,000.00	36,889.00
21.33 Acres 1847 Old Cleveland Rd Cornelia GA Habersham County	1/2 Fee Simple	W	124,140.00	154,419.00
		Total ►	284,140.00	

(Report also on Summary of Schedules.)

In re Larry Thomas Pless & Mary Ivie Pless
Debtor

Case No. _____
(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X	Checking	J	50.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X	Personal Items & Effects Personal Items & Effects Misc Garden Tools Washer & Dryer Home Entertainment Center Kitchen Appliances Small Appliances Furniture Small Appliances TV	H H J J J J J J J	300.00 300.00 300.00 300.00 300.00 300.00 300.00 300.00 300.00
3. Security deposits with public utilities, telephone companies, landlords, and others.				
4. Household goods and furnishings, including audio, video, and computer equipment.				
5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.	X	Wearing Apparel Wearing Apparel	H W	250.00 250.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.		Firearms	J	100.00

In re Larry Thomas Pless & Mary Ivie Pless
DebtorCase No. _____
(If known)**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.		Tax Refund	J	3,077.00
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			

In re Larry Thomas Pless & Mary Ivie Pless
Debtor

Case No. _____
(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re Larry Thomas Pless & Mary Ivie Pless
Debtor

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

11 U.S.C. § 522(b)(2)
 11 U.S.C. § 522(b)(3) Check if debtor claims a homestead exemption that exceeds \$155,675*.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
House on 1.79 Acres	OCGA §44-13-100(1)	42,954.00	150,000.00
2003 Chevrolet Silverado	OCGA §44-13-100(3)	2,000.00	2,000.00
1992 Chevrolet Lumina	OCGA §44-13-100(3)	500.00	500.00
2009 Kawasaki KLR 650	OCGA §44-13-100(3)	1,250.00	1,250.00
Checking	OCGA §44-13-100(6)	50.00	50.00
Wearing Apparel	OCGA §44-13-100(4)	250.00	250.00
Personal Items & Effects	OCGA §44-13-100(4)	300.00	300.00
Wearing Apparel	OCGA §44-13-100(4)	250.00	250.00
Personal Items & Effects	OCGA §44-13-100(4)	300.00	300.00
Misc Garden Tools	OCGA §44-13-100(4)	300.00	300.00
Washer & Dryer	OCGA §44-13-100(4)	300.00	300.00
Home Entertainment Center	OCGA §44-13-100(4)	300.00	300.00
Kitchen Appliances	OCGA §44-13-100(4)	300.00	300.00
Small Appliances	OCGA §44-13-100(4)	300.00	300.00
Furniture	OCGA §44-13-100(4)	300.00	300.00
Small Appliances	OCGA §44-13-100(4)	300.00	300.00
TV	OCGA §44-13-100(4)	300.00	300.00
Firearms	OCGA §44-13-100(6)	100.00	100.00

*Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Larry Thomas Pless & Mary Ivie Pless
Debtor

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT
(Continuation Page)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Tax Refund	OCGA §44-13-100(6)	3,077.00	3,077.00
	Total exemptions claimed:	53,431.00	

B6D (Official Form 6D) (12/07)

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 9506			Security: 2008 Kia Sorrento Surrender					2,613.00
Alphera Financial Services POB 3608 Dublin OH 43016-0306		J	VALUE \$ 9,000.00				11,613.00	
ACCOUNT NO.			Security: House on 1.79 Acres					
Bank of America NA POB 650070 Dallas TX 75265-0070		J	VALUE \$ 150,000.00				107,046.00	0.00
ACCOUNT NO.			Security: 2008 Yamaha ATV Rhino					
Capital One Retail Services POB 5893 Carol Stream IL 60197-5893		J	VALUE \$ 3,000.00				4,536.00	1,536.00

1 continuation sheets attached

Subtotal (Total of this page)	\$ 123,195.00	\$ 4,149.00
Total (Use only on last page)	\$	\$

(Report also on
Summary of Schedules) (If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

B6D (Official Form 6D) (12/07) – Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. United Community Banks Inc POB 398 Blairsville GA 30514		J	Security: 1975 Double-Wide Mobile Home on 1.31 Acres			36,889.00	26,889.00
			VALUE \$ 10,000.00				
ACCOUNT NO. United Community Banks Inc POB 398 Blairsville GA 30514		W	Security: 21.33 Acres 1/2 Fee Simple with co-debtor Blackburn			154,419.00	30,279.00
			VALUE \$ 124,140.00				
ACCOUNT NO.							
			VALUE \$				
ACCOUNT NO.							
			VALUE \$				
ACCOUNT NO.							
			VALUE \$				

Sheet no. 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

Subtotal (s) (Total(s) of this page)	\$ 191,308.00	\$ 57,168.00
Total(s) (Use only on last page)	\$ 314,503.00	\$ 61,317.00

(Report also on
Summary of Schedules) also on Statistical
Summary of Certain
Liabilities and Related
Data.)

B6E (Official Form 6E) (04/13)

Larry Thomas Pless & Mary Ivie Pless

In re _____, Debtor

Case No. _____ (if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

*Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (04/13) - Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
Debtor

Case No. _____
(if known)

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (04/13) - Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**
(Continuation Sheet) Sec. 507(a)(8)**Type of Priority for Claims Listed on This Sheet**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above..)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. 5387			Sales & Use Tax				15,179.00	15,179.00	0.00
GA Dept of Revenue Bankruptcy Unit 1800 Century Blvd Ste 17200 Atlanta GA 30345									
ACCOUNT NO.									
ACCOUNT NO.									
ACCOUNT NO.									
Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors Holding Priority Claims			Subtotal (Totals of this page) ➤	\$ 15,179.00	\$ 15,179.00		\$ 0.00		
			Total (Use only on last page of the completed Schedule E.) Report also on the Summary of Schedules) ➤	\$ 15,179.00					
			Totals (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.) ➤	\$	\$ 15,179.00		\$ 0.00		

B6F (Official Form 6F) (12/07)

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. 9354 Abrams Davis Keller Inc 1201 Sussex Turnpike Ste 102 Randolph NJ 07869		Consideration: Attorney >Collections>JoanBaker			Notice Only
ACCOUNT NO. Advanta Bank Corp Correspondence POB 9217 Old Bethpage NY 11804		Consideration: Revolving charge account			Notice Only
ACCOUNT NO. 0017 Advanta Bank Corp POB 31032 Tampa FL 33631		Consideration: Revolving charge account >Carson			8,827.00
ACCOUNT NO. Allied Interstate LLC 335 Madison Ave 27th Flr New York NY 10017		Consideration: Collections >CapOne			Notice Only
Subtotal ➤					\$ 8,827.00
Total ➤					\$

B6F (Official Form 6F) (12/07) - Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
				DISPUTED		
ACCOUNT NO.			Consideration: Vendor-Dillard General Store			
Appalachian Secrets Inc POB 808 Clinton TN 37717						88.00
ACCOUNT NO. 0180			Consideration: Vendor >Dillard General			
Avalon Apparel Inc CIT Group Comm Svcs POB 1036 Charlotte NC 28201						204.00
ACCOUNT NO. 2952			Consideration: Revolving charge account Fia Card Services NA ST 89 Hab Co Ga; Fia Card Services NA ST 91 Hab Co Ga			
Bank of America POB 15019 Wilmington DE 19850-5019						Notice Only
ACCOUNT NO. 3D54			Consideration: Vendor >Dillard General			
Bethel International Inc 4610 Bragg Blvd Fayetteville NC 28303						281.00
ACCOUNT NO. 7512			Consideration: Vendor >Dillard General			
Bookmark Trenz 1943 A Fowler St Ft Myers FL 33901						201.00

Sheet no. 1 of 9 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority ClaimsSubtotal ➤ \$ 774.00
Total ➤ \$(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT UNLIQUIDATED	AMOUNT OF CLAIM DISPUTED
ACCOUNT NO. 3196 Boyd's Collection LTD 350 S Street McSherrystown PA 17344		Consideration: Vendor >Dillard General		8,307.00
ACCOUNT NO. 7468 Cach LLC co Scherr PA 5901 B Peachtree Dunwoody Rd Ne Ste 400 Atlanta GA 30328		Consideration: Revolving charge account >Citibank>Collections		13,423.00
ACCOUNT NO. 7442 Capital One Bank USA NA Attn Correspondence POB 30285 Salt Lake City UT 84130-0285		Consideration: Revolving charge account and 1118>Collections/Attorney Moore		6,275.00
ACCOUNT NO. 0017 Carson Smithfield LLC POB 9216 Old Bethpage NY 11804		Consideration: Collections >Advanta		Notice Only
ACCOUNT NO. Cascade Collections Inc POB 3166 Salem OR 97302		Consideration: Collections >Whispers		Notice Only
Sheet no. <u>2</u> of <u>9</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	Subtotal ►	\$ 28,005.00	Total ►	\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6405 CBSD/SEARS POB 6241 SIOUX FALLS SD 57117		Consideration: Revolving charge account >Collections>Cach>Scherr			Notice Only
ACCOUNT NO. 0575 Chase Bank USA NA POB 15145 Wilmington DE 19850-5145		Consideration: Revolving charge account >Collections> Midland> Mag Hab Co Ga 13244CS> Washington Mutual			Notice Only
ACCOUNT NO. CIT Lease 132 W 31st St 13th Flr New York NY 10001		Consideration: Vendor>Collections >Dillard General			252.00
ACCOUNT NO. CTM Group Inc 13 Red Roof Ln Unt 1A Salem NH 03079		Consideration: Vendor >Dillard General			100.00
ACCOUNT NO. 3740 ENESCO LLC 4225 Solutions Ctr Chicago IL 60677-4002		Consideration: Vendor>Collections >Dillard General			5,609.00
Sheet no. <u>3</u> of <u>9</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	Subtotal ➤	\$ 5,961.00	Total ➤	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT UNLIQUIDATED	AMOUNT OF CLAIM DISPUTED
ACCOUNT NO. 7442 Enhanced Rec Co LLC 8014 Bayberry Rd Jacksonville FL 32256-7412		Consideration: Collections >CapOne>Moore>AlliedInterstate		Notice Only
ACCOUNT NO. Ethan Associates Inc 399 Asbury Dr Mandeville LA 70471		Consideration: Collections >ThePrairieSchooner		Notice Only
ACCOUNT NO. 8509 EVERGREEN ENT INC POB 890006 Charlotte NC 28289-0006		Consideration: Vendor >Dillard General		2,066.00
ACCOUNT NO. 2952 Fia Card Services NA co Greene Cooper LLC POB 1635 Roswell GA 30077		Consideration: Revolving charge account >Suits>TransClaimBofA>Acnt 1693		15,294.00
ACCOUNT NO. GA Dept of Revenue Taxpayer Services POB 740321 Atlanta GA 30374				Notice Only
Sheet no. <u>4</u> of <u>9</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal ► \$ 17,360.00		
		Total ► \$		

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. note Gary Vycital dba Vycital Inc 5009 E Tierra Buena Lane Scottsdale AZ 85254		Consideration: Contract >Dillard General		45,979.00
ACCOUNT NO. 7442 Gerald E Moore Assoc PC POB 876 Smyrna GA 30081		Consideration: Attorney >CapOne		Notice Only
ACCOUNT NO. Greenberg Grant Richards Inc POB 571811 Houston TX 77257		Consideration: Attorney >Collections>Squire		Notice Only
ACCOUNT NO. Greene & Cooper LLP POB 1635 Roswell GA 30077		Consideration: Attorney >Fia>12ST89		Notice Only
ACCOUNT NO. 3106 Guethy Renker 3340 Ocean Park Blvd Santa Monica CA 90405		Consideration: Revolving charge account		29.00
Sheet no. <u>5</u> of <u>9</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal ► \$ 46,008.00		
		Total ► \$		

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
			DISPUTED		
ACCOUNT NO. 9841 Habersham Medical Center POB 1629 Demorest GA 30535		Consideration: Medical Services CardLab			1,143.00
ACCOUNT NO. 1256 History & Heraldry 4001 NW 124th Ave Coral Springs FL 33065		Consideration: Vendor >Dillard General			419.00
ACCOUNT NO. 5885 Joan Baker Designs Inc 1130 Via Callejon San Clemente CA 92673		Consideration: Vendor >Dillard General>TheSourtherLink			676.00
ACCOUNT NO. 6405 Law Office Clark PLLC 3030 S Gessner Ste 200 Houston TX 77063		Consideration: Attorney >Collections>CBSDNA			Notice Only
ACCOUNT NO. 6405 Law Offices Scherr PA 5901 B Peachtree Dunwoody Rd Ne Ste 400 Atlanta GA 30328		Consideration: Revolving charge account >Citibank>Cach			Notice Only
Sheet no. <u>6</u> of <u>9</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal ➤		\$ 2,238.00
			Total ➤		\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1508 Lisa Fried Greenberg Attorney at Law POB 9320 Baldwin NY 11510		Consideration: Attorney >Collections>Avalon			Notice Only
ACCOUNT NO. 22B9 Maple Street Music 3016 Cages Bend Rd Gllatin TN 37066		Consideration: Vendor >Dillard General			325.00
ACCOUNT NO. note Mark Vycital dba Vycital Inc 522 Greening Place Clarkesville GA 30523		Consideration: Contract >Dillard General			45,979.00
ACCOUNT NO. 3106 Meaningful Beauty co RJM Acq LLC 575 Underhill Blvd Ste 224 Syosset NY 11791-4437		Consideration: Revolving charge account			29.00
ACCOUNT NO. Midland Credit Mgmt Inc 8875 Aero Dr Ste 200 San Diego CA 92123		Consideration: Suit			Notice Only

Sheet no. 7 of 9 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority ClaimsSubtotal ► \$ 46,333.00
Total ► \$(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
			DISPUTED		
ACCOUNT NO. 0575 Midland Funding LLC co Hanna Assoc PC 1427 Roswell Rd Marietta GA 30062		Consideration: Revolving charge account >Collections>Chase>Suit>Mag Hab Co Ga 13-244CS			14,193.00
ACCOUNT NO. 2374 Mountain Internal Medicine POB 880 Demorest GA 30535		Consideration: Medical Services			200.00
ACCOUNT NO. Scandal 1641 W Collins Ave Orange CA 92867		Consideration: Vendor >Dillard General			728.00
ACCOUNT NO. Simpson Uchitel Wilson LLP 3490 Piedmont Rd NE Atlanta GA 30305		Consideration: Attorney >Collections>Avalon> CIT			Notice Only
ACCOUNT NO. 1214 Squire Boone Village Inc POB 711 New Albany NY 47151-0711		Consideration: Vendor >Dillard General			1,596.00
Sheet no. <u>8</u> of <u>9</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal ➤		\$ 16,717.00
			Total ➤		\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Larry Thomas Pless & Mary Ivie Pless,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
				DISPUTED		
ACCOUNT NO.			Consideration: Revolving charge account >Dillard General			1,158.00
The Prairie Schooner POB 23919 Tucson AZ 85734						
ACCOUNT NO. 6509			Consideration: Collections >FormerlyNCO>Evergreen			Notice Only
Transworld Sys Inc 507 Prudential Rd Horsham PA 19044						
ACCOUNT NO. 0002			Consideration: Vendor >Dillard General			110.00
Whispets Co 2455 NW 26th Ave Portland OR 97210						
ACCOUNT NO. 9548			Consideration: Revolving charge account			4,536.00
Yamaha POB 5893 Carol Stream IL 60197						
ACCOUNT NO. 6405			Consideration: Attorney >Cach>Citibank			Notice Only
Zakheim LaVar PA 1045 S Univ Dr Ste 202 Plantation FL 33324						
Sheet no. <u>9</u> of <u>9</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal ➤	\$ 5,804.00	
				Total ➤	\$ 178,027.00	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Larry Thomas Pless & Mary Ivie Pless

Case No. _____

Debtor

(if known) _____

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

In re Larry Thomas Pless & Mary Ivie Pless
Debtor

Case No. _____
(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Francis Ivie Blackburn 419 Thurmond Circle Mt Airy GA 30563	United Community Banks Inc POB 398 Blairsville GA 30514

B6I (Official Form 6I) (12/07)

In re Larry Thomas Pless & Mary Ivie Pless

Case

(if known)

Debtor

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): No dependents	AGE(S):
Employment:	DEBTOR	SPOUSE
Occupation	Maintenance	Office Manager
Name of Employer	Country Hideaway	Ready Legal Support Inc
How long employed	9 Months	2 Years
Address of Employer	Condominium Assn	4513 Hwy 129 N
	Cleveland GA 30528	Cleveland GA 30528

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly.)	\$ 2,427.00	\$ 2,339.00
2. Estimated monthly overtime	\$ 0.00	\$ 0.00
3. SUBTOTAL	\$ 2,427.00	\$ 2,339.00
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$ 493.00	\$ 623.00
b. Insurance	\$ 65.00	\$ 0.00
c. Union Dues	\$ 0.00	\$ 0.00
d. Other (Specify: _____)	\$ 0.00	\$ 200.00
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ 558.00	\$ 823.00
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ 1,869.00	\$ 1,516.00
7. Regular income from operation of business or profession or farm (Attach detailed statement)	\$ 0.00	\$ 0.00
8. Income from real property	\$ 0.00	\$ 0.00
9. Interest and dividends	\$ 0.00	\$ 0.00
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ 0.00	\$ 0.00
11. Social security or other government assistance (Specify) _____	\$ 0.00	\$ 0.00
12. Pension or retirement income	\$ 0.00	\$ 0.00
13. Other monthly income <u>(S)Part-Time</u> (Specify) <u>(S)Rent</u>	\$ 0.00	\$ 600.00
14. SUBTOTAL OF LINES 7 THROUGH 13	\$ 0.00	\$ 950.00
15. AVERAGE MONTHLY INCOME (Add amounts shown on Lines 6 and 14)	\$ 1,869.00	\$ 2,466.00
16. COMBINED AVERAGE MONTHLY INCOME (Combine column totals from line 15)		\$ 4,335.00

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

None

In re Larry Thomas Pless & Mary Ivie Pless
DebtorCase No. _____
(if known)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ <u>1,335.00</u>
a. Are real estate taxes included?	Yes <u>✓</u> No _____
b. Is property insurance included?	Yes <u>✓</u> No _____
2. Utilities: a. Electricity and heating fuel	\$ <u>250.00</u>
b. Water and sewer	\$ <u>35.00</u>
c. Telephone	\$ <u>90.00</u>
d. Other <u>Cell</u>	\$ <u>120.00</u>
3. Home maintenance (repairs and upkeep)	\$ <u>100.00</u>
4. Food	\$ <u>525.00</u>
5. Clothing	\$ <u>50.00</u>
6. Laundry and dry cleaning	\$ <u>25.00</u>
7. Medical and dental expenses	\$ <u>150.00</u>
8. Transportation (not including car payments)	\$ <u>525.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ <u>0.00</u>
10. Charitable contributions	\$ <u>0.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$ <u>240.00</u>
b. Life	\$ <u>190.00</u>
c. Health	\$ <u>65.00</u>
d. Auto	\$ <u>104.00</u>
e. Other	\$ <u>0.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify)	\$ <u>0.00</u>
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ <u>0.00</u>
b. Other	\$ <u>0.00</u>
c. Other	\$ <u>0.00</u>
14. Alimony, maintenance, and support paid to others	\$ <u>0.00</u>
15. Payments for support of additional dependents not living at your home	\$ <u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ <u>0.00</u>
17. Other	\$ <u>0.00</u>
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)	\$ <u>3,804.00</u>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: <u>None</u>	
20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I (Includes spouse income of \$2,466.00. See Schedule I)	\$ <u>4,335.00</u>
b. Average monthly expenses from Line 18 above	\$ <u>3,804.00</u>
c. Monthly net income (a. minus b.) (Net includes Debtor/Spouse combined Amounts)	\$ <u>531.00</u>

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court
Northern District of Georgia

In re Larry Thomas Pless & Mary Ivie Pless

Case No. _____

Debtor

Chapter 13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 284,140.00		
B - Personal Property	YES	3	\$ 22,477.00		
C - Property Claimed as exempt	YES	2			
D - Creditors Holding Secured Claims	YES	2		\$ 314,503.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	3		\$ 15,179.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	10		\$ 178,027.00	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 4,335.00
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 3,804.00
TOTAL		25	\$ 306,617.00	\$ 507,709.00	

United States Bankruptcy Court
Northern District of GeorgiaIn re Larry Thomas Pless & Mary Ivie Pless
Debtor

Case No. _____

Chapter 13**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 15,179.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 15,179.00

State the Following:

Average Income (from Schedule I, Line 16)	\$ 4,335.00
Average Expenses (from Schedule J, Line 18)	\$ 3,804.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 5,716.00

State the Following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 61,317.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 15,179.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 178,027.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 239,344.00

In re Larry Thomas Pless & Mary Ivie Pless
 Debtor(s)

Case Number: _____
 (If known)

According to the calculations required by this statement:

The applicable commitment period is 3 years.
 The applicable commitment period is 5 years.
 Disposable income is determined under § 1325(b)(3).
 Disposable income not determined under § 1325(b)(3).

(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedule I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

Part I. REPORT OF INCOME

		Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.	Column A Debtor's Income	Column B Spouse's Income
1	a. <input type="checkbox"/> Unmarried.	Complete only Column A ("Debtor's Income") for Lines 2-10.		
1	b. <input checked="" type="checkbox"/> Married.	Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.		
1	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.			
2	Gross wages, salary, tips, bonuses, overtime, commissions.	\$ 2,427.00	\$ 2,339.00	
3	Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.			
	a. Gross receipts	\$ 0.00		
	b. Ordinary and necessary business expenses	\$ 0.00		
	c. Business income	Subtract Line b from Line a	\$ 0.00	\$ 0.00
4	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV.			
	a. Gross receipts	\$ 0.00		
	b. Ordinary and necessary operating expenses	\$ 0.00		
	c. Rent and other real property income	Subtract Line b from Line a	\$ 0.00	\$ 0.00
5	Interest, dividends and royalties.	\$ 0.00	\$ 0.00	
6	Pension and retirement income.	\$ 0.00	\$ 0.00	
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.			
		\$ 0.00	\$ 0.00	

8	<p>Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:</p> <table border="1"> <tr> <td>Unemployment compensation claimed to be a benefit under the Social Security Act</td><td>Debtor \$ 0.00</td><td>Spouse \$ 0.00</td></tr> </table>	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ 0.00	Spouse \$ 0.00	\$ 0.00	\$ 0.00	
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ 0.00	Spouse \$ 0.00					
9	<p>Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.</p> <table border="1"> <tr> <td>a. (H), Part-Time</td> <td>\$ 600.00</td> </tr> <tr> <td>b. (H), Rent</td> <td>\$ 350.00</td> </tr> </table>	a. (H), Part-Time	\$ 600.00	b. (H), Rent	\$ 350.00	\$ 0.00	\$ 950.00
a. (H), Part-Time	\$ 600.00						
b. (H), Rent	\$ 350.00						
10	<p>Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).</p>	\$ 2,427.00	\$ 3,289.00				
11	<p>Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.</p>	\$ 5,716.00					

Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD

12	Enter the Amount from Line 11.	\$ 5,716.00						
13	<p>Marital adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.</p> <table border="1"> <tr> <td>a.</td> <td>\$ 0.00</td> </tr> <tr> <td>b.</td> <td>\$ 0.00</td> </tr> <tr> <td>c.</td> <td>\$ 0.00</td> </tr> </table>	a.	\$ 0.00	b.	\$ 0.00	c.	\$ 0.00	
a.	\$ 0.00							
b.	\$ 0.00							
c.	\$ 0.00							
	Total and enter on Line 13.	\$ 0.00						
14	Subtract Line 13 from Line 12 and enter the result.	\$ 5,716.00						
15	Annualized current monthly income for §1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	\$ 68,592.00						
16	<p>Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p> <p>a. Enter debtor's state of residence: <u>Georgia</u> b. Enter debtor's household size: <u>2</u></p>	\$ 51,954.00						
17	<p>Application of §1325(b)(4). Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and continue with this statement.</p> <p><input checked="" type="checkbox"/> The amount on Line 15 is more than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with this statement.</p>							

Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME

18	Enter the Amount from Line11.	\$ 5,716.00
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	<p>Marital adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify, in the lines below, the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.</p> <table border="1" style="margin-left: 20px;"> <tr> <td>a.</td> <td></td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>b.</td> <td></td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>c.</td> <td></td> <td style="text-align: right;">\$ 0.00</td> </tr> </table> <p>Total and enter on Line 19.</p>			a.		\$ 0.00	b.		\$ 0.00	c.		\$ 0.00														
a.		\$ 0.00																								
b.		\$ 0.00																								
c.		\$ 0.00																								
19				\$ 0.00																						
20	Current monthly income for §1325(b)(3). Subtract Line 19 from Line 18 and enter the result.			\$ 5,716.00																						
21	Annualized current monthly income for §1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.			\$ 68,592.00																						
22	Applicable median family income. Enter the amount from Line 16.			\$ 51,954.00																						
23	<p>Application of §1325(b)(3). Check the applicable box and proceed as directed.</p> <p><input checked="" type="checkbox"/> The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under §1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.</p> <p><input type="checkbox"/> The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not determined under §1325(b)(3)" at the top of page 1 of this statement and continue with Part VII of this statement. Do not complete Parts IV, V or VI.</p>																									
Part IV. CALCULATION OF DEDUCTIONS FROM INCOME																										
Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)																										
24A	<p>National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.</p>			\$ 1,029.00																						
24B	<p>National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.</p> <table border="1" style="margin-left: 20px;"> <thead> <tr> <th colspan="2">Persons under 65 years of age</th> <th colspan="2">Persons 65 years of age or older</th> </tr> </thead> <tbody> <tr> <td>a1.</td> <td>Allowance per person</td> <td>60.00</td> <td>a2.</td> <td>Allowance per person</td> <td>144.00</td> </tr> <tr> <td>b1</td> <td>Number of persons</td> <td>2</td> <td>b2.</td> <td>Number of persons</td> <td>0</td> </tr> <tr> <td>c1.</td> <td>Subtotal</td> <td>120.00</td> <td>c2.</td> <td>Subtotal</td> <td>0.00</td> </tr> </tbody> </table>			Persons under 65 years of age		Persons 65 years of age or older		a1.	Allowance per person	60.00	a2.	Allowance per person	144.00	b1	Number of persons	2	b2.	Number of persons	0	c1.	Subtotal	120.00	c2.	Subtotal	0.00	\$ 120.00
Persons under 65 years of age		Persons 65 years of age or older																								
a1.	Allowance per person	60.00	a2.	Allowance per person	144.00																					
b1	Number of persons	2	b2.	Number of persons	0																					
c1.	Subtotal	120.00	c2.	Subtotal	0.00																					
25A	<p>Local Standards: housing and utilities; non-mortgage expenses. Enter amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.</p>			\$ 484.00																						

25B	<p>Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. HABERSHAM COUNTY</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">a.</td> <td>IRS Housing and Utilities Standards; mortgage/rental expense</td> <td style="width: 10%;">\$</td> <td>860.00</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47</td> <td>\$</td> <td>0.00</td> </tr> <tr> <td>c.</td> <td>Net mortgage/rental expense</td> <td></td> <td>Subtract Line b from Line a.</td> </tr> </table>			a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$	860.00	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$	0.00	c.	Net mortgage/rental expense		Subtract Line b from Line a.	\$ 860.00
a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$	860.00													
b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$	0.00													
c.	Net mortgage/rental expense		Subtract Line b from Line a.													
26	<p>Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p> 			\$ 0.00												
27A	<p>Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. SOUTH REGION</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 or more.</p> <p>If you checked 0, enter on Line 27A the “Public Transportation” amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the “Operating Costs” amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>			\$ 488.00												
27B	<p>Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the “Public Transportation” amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>			\$ 0.00												
28	<p>Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>Enter, in Line a below, the “Ownership Costs” for “One Car” from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">a.</td> <td>IRS Transportation Standards, Ownership Costs</td> <td style="width: 10%;">\$</td> <td>517.00</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47</td> <td>\$</td> <td>0.00</td> </tr> <tr> <td>c.</td> <td>Net ownership/lease expense for Vehicle 1</td> <td></td> <td>Subtract Line b from Line a.</td> </tr> </table>			a.	IRS Transportation Standards, Ownership Costs	\$	517.00	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$	0.00	c.	Net ownership/lease expense for Vehicle 1		Subtract Line b from Line a.	\$ 0.00
a.	IRS Transportation Standards, Ownership Costs	\$	517.00													
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$	0.00													
c.	Net ownership/lease expense for Vehicle 1		Subtract Line b from Line a.													

29	<p>Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the “2 or more” Box in Line 28.</p> <p>Enter, in Line a below, the “Ownership Costs” for “One Car” from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.</p> <table border="1"> <tr> <td>a.</td><td>IRS Transportation Standards, Ownership Costs</td><td>\$ 517.00</td></tr> <tr> <td>b.</td><td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47</td><td>\$ 0.00</td></tr> <tr> <td>c.</td><td>Net ownership/lease expense for Vehicle 2</td><td>Subtract Line b from Line a.</td></tr> </table>			a.	IRS Transportation Standards, Ownership Costs	\$ 517.00	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$ 0.00	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.
a.	IRS Transportation Standards, Ownership Costs	\$ 517.00										
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$ 0.00										
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.										
30	<p>Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.</p>											
31	<p>Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.</p>											
32	<p>Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.</p>											
33	<p>Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 49.</p>											
34	<p>Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.</p>											
35	<p>Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.</p>											
36	<p>Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.</p>											
37	<p>Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunications services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.</p>											
38	<p>Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.</p>											
<p>Subpart B: Additional Living Expense Deductions</p> <p>Note: Do not include any expenses that you have listed in Lines 24-37</p>												

	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.										
39	<table border="1"> <tr> <td>a.</td><td>Health Insurance</td><td>\$ 65.00</td></tr> <tr> <td>b.</td><td>Disability Insurance</td><td>\$ 0.00</td></tr> <tr> <td>c.</td><td>Health Savings Account</td><td>\$ 0.00</td></tr> </table>	a.	Health Insurance	\$ 65.00	b.	Disability Insurance	\$ 0.00	c.	Health Savings Account	\$ 0.00	
a.	Health Insurance	\$ 65.00									
b.	Disability Insurance	\$ 0.00									
c.	Health Savings Account	\$ 0.00									
	Total and enter on Line 39 If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$ 0.00	\$ 65.00									
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.	\$ 0.00									
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$ 0.00									
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	\$ 0.00									
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$ 0.00									
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.	\$ 0.00									
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	\$ 0.00									
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	\$ 65.00									

Subpart C: Deductions for Debt Payment

	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes and insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.																										
47	<table border="1"> <thead> <tr> <th></th><th>Name of Creditor</th><th>Property Securing the Debt</th><th>Average Monthly Payment</th><th>Does payment include taxes or insurance?</th></tr> </thead> <tbody> <tr> <td>a.</td><td>Bank of America</td><td>House and Land</td><td>\$ 1,335.00</td><td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td></tr> <tr> <td>b.</td><td></td><td></td><td>\$ 0.00</td><td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td></tr> <tr> <td>c.</td><td></td><td></td><td>\$ 0.00</td><td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td></tr> <tr> <td></td><td></td><td></td><td>Total: Add Lines a, b and c</td><td></td></tr> </tbody> </table>		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	a.	Bank of America	House and Land	\$ 1,335.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	b.			\$ 0.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	c.			\$ 0.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no				Total: Add Lines a, b and c		\$ 1,335.00
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?																							
a.	Bank of America	House and Land	\$ 1,335.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no																							
b.			\$ 0.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no																							
c.			\$ 0.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no																							
			Total: Add Lines a, b and c																								

48	<p>Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the “cure amount”) that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.</p> <table border="1"> <thead> <tr> <th></th> <th>Name of Creditor</th> <th>Property Securing the Debt</th> <th>1/60th of the Cure Amount</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td>GA Dpt of Rev</td> <td>Sales Tax</td> <td>\$ 252.98</td> </tr> <tr> <td>b.</td> <td></td> <td></td> <td>\$ 0.00</td> </tr> <tr> <td>c.</td> <td></td> <td></td> <td>\$ 0.00</td> </tr> <tr> <td></td> <td></td> <td></td> <td>Total: Add Lines a, b and c \$ 252.98</td> </tr> </tbody> </table>					Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount	a.	GA Dpt of Rev	Sales Tax	\$ 252.98	b.			\$ 0.00	c.			\$ 0.00				Total: Add Lines a, b and c \$ 252.98	
	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount																						
a.	GA Dpt of Rev	Sales Tax	\$ 252.98																						
b.			\$ 0.00																						
c.			\$ 0.00																						
			Total: Add Lines a, b and c \$ 252.98																						
49	<p>Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33.</p>				\$ 0.00																				
50	<p>Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.</p> <table border="1"> <tbody> <tr> <td>a.</td> <td>Projected average monthly Chapter 13 plan payment.</td> <td>\$ 0.00</td> </tr> <tr> <td>b.</td> <td>Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</td> <td>x 4.7 %</td> </tr> <tr> <td>c.</td> <td>Average monthly administrative expense of Chapter 13 case</td> <td>Total: Multiply Lines a and b \$ 0.00</td> </tr> </tbody> </table>				a.	Projected average monthly Chapter 13 plan payment.	\$ 0.00	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	x 4.7 %	c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b \$ 0.00												
a.	Projected average monthly Chapter 13 plan payment.	\$ 0.00																							
b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	x 4.7 %																							
c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b \$ 0.00																							
51	<p>Total Deductions for Debt Payment. Enter the total of Lines 47 through 50.</p>				\$ 1,587.98																				
Subpart D: Total Deductions from Income																									
52	<p>Total of all deductions from income. Enter the total of Lines 38, 46, and 51.</p>				\$ 5,939.98																				
Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)																									
53	<p>Total current monthly income. Enter the amount from Line 20.</p>				\$ 5,716.00																				
54	<p>Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.</p>				\$ 0.00																				
55	<p>Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).</p>				\$ 0.00																				
56	<p>Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.</p>				\$ 5,939.98																				
57	<p>Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expenses necessary and reasonable.</p> <table border="1"> <thead> <tr> <th></th> <th>Nature of special circumstances</th> <th>Amount of expense</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td></td> <td>\$</td> </tr> <tr> <td>b.</td> <td></td> <td>\$</td> </tr> <tr> <td>c.</td> <td></td> <td>\$</td> </tr> <tr> <td></td> <td></td> <td>Total: Add Lines a, b and c \$ 0.00</td> </tr> </tbody> </table>					Nature of special circumstances	Amount of expense	a.		\$	b.		\$	c.		\$			Total: Add Lines a, b and c \$ 0.00						
	Nature of special circumstances	Amount of expense																							
a.		\$																							
b.		\$																							
c.		\$																							
		Total: Add Lines a, b and c \$ 0.00																							

58	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56 and 57 and enter the result.	\$ 5,939.98
59	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.	\$ -223.98

Part VI: ADDITIONAL EXPENSE CLAIMS

60	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.	
	Expense Description	Monthly Amount
	a.	\$ 0.00
	b.	\$ 0.00
	c.	\$ 0.00
Total: Add Lines a, b and c		0.00

Part VII: VERIFICATION

61	I declare under penalty of perjury that the information provided in this statement is true and correct. (<i>If this a joint case, both debtors must sign.</i>)	
	Date: 04/09/13	Signature: /s/ Larry Thomas Pless (Debtor)
	Date: 04/09/13	Signature: /s/ Mary Ivie Pless (Joint Debtor, if any)

Form 22 Continuation Sheet

Income Month 1		Income Month 2			
Gross wages, salary, tips...	2,427.00	2,339.00	Gross wages, salary, tips...	2,427.00	2,339.00
Income from business...	0.00	0.00	Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
Other Income...	0.00	950.00	Other Income...	0.00	950.00
Income Month 3		Income Month 4			
Gross wages, salary, tips...	2,427.00	2,339.00	Gross wages, salary, tips...	2,427.00	2,339.00
Income from business...	0.00	0.00	Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
Other Income...	0.00	950.00	Other Income...	0.00	950.00
Income Month 5		Income Month 6			
Gross wages, salary, tips...	2,427.00	2,339.00	Gross wages, salary, tips...	2,427.00	2,339.00
Income from business...	0.00	0.00	Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
Other Income...	0.00	950.00	Other Income...	0.00	950.00
Additional Items as Designated, if any					
Remarks					

Advanta Bank Corp
Correspondence
POB 9217
Old Bethpage NY 11804

Advanta Bank Corp
POB 31032
Tampa FL 33631

Allied Interstate LLC
335 Madison Ave 27th Flr
New York NY 10017

Alphera Financial Services
POB 3608
Dublin OH 43016-0306

Appalachian Secrets Inc
POB 808
Clinton TN 37717

Avalon Apparel Inc
CIT Group Comm Svcs
POB 1036
Charlotte NC 28201

Bank of America
POB 15019
Wilmington DE 19850-5019

Bank of America NA
POB 650070
Dallas TX 75265-0070

Bethel International Inc
4610 Bragg Blvd
Fayetteville NC 28303

Boyds Collection LTD
350 S Street
McSherrystown PA 17344

Cach LLC
co Scherr PA
5901 B Peachtree Dunwoody Rd Ne Ste 400
Atlanta GA 30328

Capital One Bank USA NA
Attn Correspondence
POB 30285
Salt Lake City UT 84130-0285

Capital One Retail Services
POB 5893
Carol Stream IL 60197-5893

Carson Smithfield LLC
POB 9216
Old Bethpage NY 11804

Cascade Collections Inc
POB 3166
Salem OR 97302

CBSDSEARS
POB 6241
SIOUX FALLS SD 57117

Chase Bank USA NA
POB 15145
Wilmington DE 19850-5145

CIT Lease
132 W 31st St 13th Flr
New York NY 10001

ENESCO LLC
4225 Solutions Ctr
Chicago IL 60677-4002

Enhanced Rec Co LLC
8014 Bayberry Rd
Jacksonville FL 32256-7412

Ethan Associates Inc
399 Asbury Dr
Mandeville LA 70471

EVERGREEN ENT INC
POB 890006
Charlotte NC 28289-0006

Fia Card Services NA
co Greene Cooper LLC
POB 1635
Roswell GA 30077

Francis Ivie Blackburn
419 Thurmond Circle
Mt Airy GA 30563

GA Dept of Revenue
Bankruptcy Unit
1800 Century Blvd Ste 17200
Atlanta GA 30345

GA Dept of Revenue
Taxpayer Services
POB 740321
Atlanta GA 30374

Gary Vycital
dba Vycital Inc
5009 E Tierra Buena Lane
Scottsdale AZ 85254

Greenberg Grant Richards Inc
POB 571811
Houston TX 77257

Greene Cooper LLP
POB 1635
Roswell GA 30077

Guethy Renker
3340 Ocean Park Blvd
Santa Monica CA 90405

Habersham Medical Center
POB 1629
Demorest GA 30535

History Heraldry
4001 NW 124th Ave
Coral Springs FL 33065

Joan Baker Designs Inc
1130 Via Callejon
San Clemente CA 92673

Law Office Clark PLLC
3030 S Gessner Ste 200
Houston TX 77063

Law Offices Scherr PA
5901 B Peachtree Dunwoody Rd Ne
Ste 400
Atlanta GA 30328

Lisa Fried Greenberg
Attorney at Law
POB 9320
Baldwin NY 11510

Mark Vycital
dba Vycital Inc
522 Greening Place
Clarkesville GA 30523

Meaningful Beauty
co RJM Acq LLC
575 Underhill Blvd Ste 224
Syosset NY 11791-4437

Midland Credit Mgmt Inc
8875 Aero Dr Ste 200
San Diego CA 92123

Midland Funding LLC
co Hanna Assoc PC
1427 Roswell Rd
Marietta GA 30062

Mountain Internal Medicine
POB 880
Demorest GA 30535

Scandal
1641 W Collins Ave
Orange CA 92867

Simpson Uchitel Wilson LLP
3490 Piedmont Rd NE
Atlanta GA 30305

Squire Boone Village Inc
POB 711
New Albany NY 47151-0711

The Prairie Schooner
POB 23919
Tucson AZ 85734

United Community Banks Inc
POB 398
Blairsville GA 30514

Whispets Co
2455 NW 26th Ave
Portland OR 97210

Yamaha
POB 5893
Carol Stream IL 60197

Zakheim LaVar PA
1045 S Univ Dr Ste 202
Plantation FL 33324